Applica	tion No.(s):			/ 0 / .
	(0	ounty-assigned application number(s), to be entered b	y County Staff)	124869
	\$	SPECIAL PERMIT/VARIANCE AFFIDA	VIT	
		DATE: <u>03/21/14</u> (enter date affidavit is notarized)		
I. Ren	U R. GUPTO D.B.A. UL ANO	ELS IN-HOME MONTESSORI & DAYCARE, do here	by state that I am an	
	(enter name of applicant or	authorized agent)		•
(check		cant cant's authorized agent listed in Par. 1(a) bel	: ow	
and tha	nt, to the best of my knowled	ge and belief, the following is true:		
	relationships may be listed	to the application listed above in <b>BOLD</b> printogether, e.g., <b>Attorney/Agent</b> , <b>Contract Proceed application</b> , list the Tax Map Number(s)	urchaser/Lessee, Applie	cant/Title
(enter	NAME first name, middle initial, and	ADDRESS (enter number, street, city, state, and zip code)	RELATIONSHIP(S) (enter applicable relation listed in BOLD above)	nships
RENU	I R. GUPTA D.B.A. LIL EIS IN-HOME MONTESSORI AVCARE	13591 BIG BOULDER RD HERNDON, VA ZOITI	APPLICANT / TITLE OF	WNER
RATE	EV GUPTA	13591 BIG BOULDER RD HERNDON, VA 20171	CO-TITLE OWNER	
		,		
. *			. •	
	(check if applicable) [	There are more relationships to be listed		ied

FORM SP/VC-1 Updated (7/1/06)

name of each beneficiary).

\* In the case of a condominium, the title owner, contract purchaser, or lessee of 10% or more of the units in the condominium.

\*\* List as follows: Name of trustee, Trustee for (name of trust, if applicable), for the benefit of: (state

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	DATE: 03/21/14 (2486)
1(b).	The following constitutes a listing*** of the SHAREHOLDERS of all corporations disclosed in this affidavit whown 10% or more of any class of stock issued by said corporation, and where such corporation has 10 or less shareholders, a listing of all of the shareholders:
	E: Include SOLE PROPRIETORSHIPS, LIMITED LIABILITY COMPANIES, and REAL ESTATE STMENT TRUSTS herein.)
	CORPORATION INFORMATION
NAMI	E & ADDRESS OF CORPORATION: (enter complete name, number, street, city, state, and zip code)
DECO	DIDITION OF COPPORATION, (shock one statement)
DESC	RIPTION OF CORPORATION: (check one statement)  [ ] There are 10 or less shareholders, and all of the shareholders are listed below.
	There are more than 10 shareholders, and all of the shareholders owning 10% or more of
	any class of stock issued by said corporation are listed below.  [ ] There are more than 10 shareholders, but no shareholder owns 10% or more of any class
	of stock issued by said corporation, and no shareholders are listed below.
NAMI	ES OF SHAREHOLDERS: (enter first name, middle initial, and last name)
1 11 21 1 23	
	·
(check	if applicable) [ ] There is more corporation information and Par. 1(b) is continued on a "Special Permit/Variance Attachment 1(b)" form.
until (a) 10% or land the partner breakde PURCE corpora to desig	listings which include partnerships, corporations, or trusts, to include the names of beneficiaries, must be broken down successively only individual persons are listed or (b) the listing for a corporation having more than 10 shareholders has no shareholder owning more of any class of stock. In the case of an APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE* of the at is a partnership, corporation, or trust, such successive breakdown must include a listing and further breakdown of all of its so, of its shareholders as required above, and of beneficiaries of any trusts. Such successive breakdown must also include owns of any partnership, corporation, or trust owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT MASER or LESSEE* of the land. Limited liability companies and real estate investment trusts and their equivalents are treated attions, with members being deemed the equivalent of shareholders; managing members shall also be listed. Use footnote numbers nate partnerships or corporations, which have further listings on an attachment page, and reference the same footnote numbers on the ent page.

Application No.(s):				
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	DATE:03/	121/14		12480
·	(enter	date affidavit is notarize	ed)	
				·
	nstitutes a listing*** of all of osed in this affidavit:	the PARTNERS, both G	ENERAL and LIMITEI	), in any
	PARTNE	RSHIP INFORMATION		
PARTNERSHIP NAMI	E & ADDRESS: (enter comp	olete name, number, street,	city, state, and zip code)	•
			•	
		•		
(check if applicable) [	] The above-listed partnership	has no limited partners.		
	OF THE PARTNERS (enter neral and Limited Partner)	first name, middle initial,	last name, and title, e.g. C	General Partner,
			•	
			•	
	•			
			•	
	•			·
	•		÷	
	•	•		
(check if applicable)	There is more partnership in: Permit/Variance Attachment		continued on a "Special	
until: (a) only individual pers 10% or more of any class of s land that is a partnership, co partners, of its shareholders breakdowns of any partnersh PURCHASER, or LESSEE* corporations, with members	e partnerships, corporations, or trustons are listed or (b) the listing for stock. In the case of an APPLICA reporation, or trust, such successive as required above, and of beneficing, corporation, or trust owning of the land. Limited liability corbeing deemed the equivalent of sucreporations, which have further list	r a corporation having more the ANT, TITLE OWNER, CON ive breakdown must include contracts of any trusts. Such sulfaments of the APPLIC mpanies and real estate investing membareholders; managing mem	han 10 shareholders has no share the transfer of Land Internation	areholder owning ESSEE* of the wn of all of its so include ITRACT when its are treated as to footnote numbers

Applic	ation No	o.(s):	(00	nints, secion	ed application	umber(s) to be	entered by Cou	ntr. Ctaff)	•
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	****	e page e e	•	DATE: _	(enter date a	ffidavit is no	tarized)	· _	124869
1(d).	One	of the following	g boxes <u>n</u>	nust be ch	ecked:				
	[]	all other indivi	duals wh	10 own in 1	he aggregate	(directly and	as a sharehold	er, partner, and	listing of any and beneficiary of a R, or LESSEE* of
					• .				
					•				
				٠	•	· · · · ·			
	[x]	Other than the (directly and as							n the aggregate
2.	her in		he Fairfa hold own	x County l	Board of Zon	ing Appeals, I	Planning Com subject land ei	ther individual	member of his or y, by ownership of
	•	-		_	•		·		<b>u.</b>
		EPT AS FOLI	<u>LOWS</u> :	(NOTE: 1	If answer is no	one, enter "NC	ONE" on the l	ine below.)	•
	1001	NE		•	,				
				•					
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•				*•					
	(chec	k if applicable)	[]				and Par. 2 is ont to Par. 2" fo	continued on a orm.	
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Applica	tion No.(s):(county-assigned application number(s), to be entered by County Staff)	
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	SPECIAL PERMIT/VARIANCE AFFIDAVIT	• •
	DATE: 03/21/2014 (enter date affidavit is notarized)	124869
	(enter date affidavit is notarized)	
3.	That within the twelve-month period prior to the public hearing of this application, no member County Board of Zoning Appeals, Planning Commission, or any member of his or her immedidirectly or by way of partnership in which any of them is a partner, employee, agent, or attorned partner of any of them, or through a corporation in which any of them is an officer, director, or attorney or holds 10% or more of the outstanding bonds or shares of stock of a particular class business or financial relationship, other than any ordinary depositor or customer relationship we establishment, public utility, or bank, including any gift or donation having a value of more that or in the aggregate, with any of those listed in Par. 1 above.	ate household, either ey, or through a nployee, agent, or , has, or has had any vith or by a retail
	EXCEPT AS FOLLOWS: (NOTE: If answer is none, enter "NONE" on line below.)	•
	NONE	
	(NOTE: Business or financial relationships of the type described in this paragraph that arise this application and before each public hearing must be disclosed prior to the public 4 below.)  (check if applicable) [ ] There are more disclosures to be listed and Par. 3 is continued on a "Special Permit/Variance Attachment to Par. 3" form.	c hearings. See Par.
4.	That the information contained in this affidavit is complete, that all partnerships, corpor owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASES the land have been listed and broken down, and that prior to each and every public heari will reexamine this affidavit and provide any changed or supplemental information, including the contraction of the type described in Paragraph 3 above, that arise on or after the application.	R, or LESSEE* of ing on this matter, I iding business or
WITN.	ESS the following signature:	
	(check one) [] Applicant [] Applicant's Authorized Age	nt
	(type or print first name, middle initial, last name, and title of si	
	bed and sworn to before me this 21 day of March 2014, in the State/	
My con	Amission expires: 0(e/30/16	NOTARY PUBLIC REG. #7514630 NY COMMISSION NY
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